

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
Before the Board of Patent Appeals and Interferences

In re Patent Application of

Atty Dkt. 2380-1368

C# M#

Confirmation No. 9272

TC/A.U.: 2474

William WARRILLOW et al

Serial No. 10/581,999

Examiner: Awet A. HAILE

Filed: March 20, 2007

Date: September 13, 2011

Title: METHOD AND DEVICE FOR MANGING RESOURCES SHARED BY DIFFERENT
OPERATIONS IN A COMMUNICATION SYSTEM

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

☐ Correspondence Address Indication Form Attached.

☒ **NOTICE OF APPEAL**

Applicant hereby **appeals** to the Board of Patent Appeals and Interferences
from the last decision of the Examiner twice/finally rejecting
applicant's claim(s).

\$540.00 (1401)/\$0.00 (2401) \$ 540.00

☐ An appeal **BRIEF** is attached in the pending appeal of the
above-identified application

\$540.00 (1402)/\$0.00 (2402) \$

☐ Credit for fees paid in prior appeal without decision on merits

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☐ A reply brief is attached.

(no fee)

☒ Pre-Appeal Brief Request for Review form attached.

☒ Petition is hereby made to extend the current due date so as to cover the filing date of this
paper and attachment(s)

One Month Extension \$130.00 (1251)/\$0.00 (2251)
Two Month Extensions \$490.00 (1252)/\$0.00 (2252)
Three Month Extensions \$1110.00 (1253)/\$0.00 (2253)
Four Month Extensions \$1730.00 (1254)/\$0.00 (2254) \$ 490.00

☐ "Small entity" statement attached.

Less month extension previously paid on

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TOTAL FEE ENCLOSED \$ 1030.00

☒ **CREDIT CARD PAYMENT VIA EFS PAYMENT SCREEN.**

Any future submission requiring an extension of time is hereby stated to include a petition for such time extension.
The Commissioner is hereby authorized to charge any deficiency, or credit any overpayment, in the fee(s) filed, or
asserted to be filed, or which should have been filed herewith (or with any paper hereafter filed in this application by this
firm) to our **Account No. 14-1140**.

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HNS/edg

NIXON & VANDERHYE P.C.
By Atty: Hyung N. Sohn, Reg. No. 44,346

Signature: _____